

Form **990**Department of the Treasury  
Internal Revenue Service**Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No 1545-0047

**2008**Open to Public  
Inspection**A For the 2008 calendar year, or tax year beginning****and ending****B** Check if applicable

- ☐ Address change  
☐ Name change  
☐ Initial return  
☐ Termination  
☐ Amended return  
☐ Application pending

Please use IRS label or print or type

See Specific Instructions

**C** Name of organization**ONEIDA GOLF & COUNTRY CLUB, INC.**

Doing Business As

Number and street (or P.O. box if mail is not delivered to street address) Room/suite

**P.O. BOX 10736**

City or town, state or country, and ZIP + 4

**GREEN BAY, WI 54307-0736****F** Name and address of principal officer: **BILL PLUMMER****4553 ALGONQUIN, GREEN BAY, WI 54313****D** Employer identification number**39-0518065****E** Telephone number**920-498-6500****G** Gross receipts \$**5,089,403.****H(a)** Is this a group return

for affiliates?

☐ Yes☒ No**H(b)** Are all affiliates included?☐ Yes☐ No

If "No," attach a list. (see instructions)

**H(c)** Group exemption number ▶**I** Tax-exempt status: ☒ 501(c) (7) (insert no.) ☐ 4947(a)(1) or ☐ 527**J** Website: **WWW.ONEIDAGCC.COM****K** Type of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶**L** Year of formation: **1928****M** State of legal domicile: **WI****Part I Summary**

<b>1</b> Briefly describe the organization's mission or most significant activities: <b>SEE STATEMENT O</b>	
<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its assets.	
<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	<b>12</b>
<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	<b>12</b>
<b>5</b> Total number of employees (Part V, line 2a)	<b>0</b>
<b>6</b> Total number of volunteers (estimate if necessary)	<b>0</b>
<b>7a</b> Total gross unrelated business revenue from Part VIII, line 12, column (C)	<b>244,706.</b>
<b>7b</b> Net unrelated business taxable income from Form 990-T, line 34	<b>-276,267.</b>
<b>8</b> Contributions and grants (Part VIII, line 1h)	<b>2,740,500.</b>
<b>9</b> Program service revenue (Part VIII, line 2g)	<b>3,371,451.</b>
<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	<b>8,141.</b>
<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<b>2,984.</b>
<b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<b>909,540.</b>
<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)	<b>4,675,874.</b>
<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)	<b>4,283,975.</b>
<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	<b>2,251,525.</b>
<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)	<b>2,387,438.</b>
<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶	<b>4,521,123.</b>
<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	<b>4,638,963.</b>
<b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	<b>4,521,123.</b>
<b>19</b> Revenue less expenses. Subtract line 18 from line 12	<b>36,911.</b>
<b>20</b> Total assets (Part X, line 16)	<b>7,980,031.</b>
<b>21</b> Total liabilities (Part X, line 26)	<b>4,200,234.</b>
<b>22</b> Net assets or fund balances. Subtract line 21 from line 20	<b>3,779,797.</b>

**Part II Signature Block**

<b>Sign Here</b>	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.	
	Signature of officer <b>LEROY MATUSZAK, TREASURER</b>	Date <b>11/3/09</b>
<b>Paid Preparer's Use Only</b>	Preparer's signature <b>RANDY M. DUMMER</b>	Date <b>10/15/09</b>
	Firm's name (or yours if self-employed), address, and ZIP + 4 <b>BAKER TILLY VIRCHOW KRAUSE, LLP 2201 E ENTERPRISE AVE., P O BOX 2459 APPLETON, WI 54912-2459</b>	Check if self-employed <input type="checkbox"/> Preparer's identifying number (see instructions) <b>EIN ▶ (920) 733-7385</b>

May the IRS discuss this return with the preparer shown above? (see instructions)

☒ Yes☐ No

832001 12-18-08

LHA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2008)**SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION**

**Part III** Statement of Program Service Accomplishments (see instructions)

1 Briefly describe the organization's mission:

TO PROVIDE MEMBERS A SAFE, DISCREET AND SECURE FAMILY ENVIRONMENT WITH  
MANY SOCIAL GATHERINGS, CHILDREN'S PROGRAMS, GOLF, SWIMMING, TENNIS,  
AND THE OPPORTUNITY TO TAKE LESSONS FROM TENNIS AND GOLF  
PROFESSIONALS.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

☐ Yes ☒ No

If "Yes", describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?

☐ Yes ☒ No

If "Yes", describe these changes on Schedule O.

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.

Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ 1,711,652.)  
TO PROVIDE OPPORTUNITIES FOR OVER 400 MEMBERS FOR FINE DINING WITHIN  
THE DINING ROOM AREA AND ATTEND SOCIAL GATHERINGS WITHIN THE BAR, AND  
CABANA AREAS.

4b (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ 589,838.)  
TO PROVIDE FACILITIES FOR MEMBERS TO PLAY GOLF, PLAY TENNIS, AND/OR  
SWIM AND TO ALSO PROVIDE LESSONS FROM PROFESSIONALS.

4c (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

4d Other program services. (Describe in Schedule O.)

(Expenses \$ including grants of \$ ) (Revenue \$ )

4e Total program service expenses ▶ \$ (Must equal Part IX, Line 25, column (B).)

**Part IV Checklist of Required Schedules**

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>		X
2 Is the organization required to complete Schedule B, Schedule of Contributors?		X
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 <b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities? <i>If "Yes," complete Schedule C, Part II</i>	N/A	
5 <b>Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations.</b> Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? <i>If "Yes," complete Schedule C, Part III</i>	N/A	
6 Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
9 Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>		X
11 Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? <i>If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable</i>	X	
12 Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i>	X	
13 Is the organization a school as described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the U.S.?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? <i>If "Yes," complete Schedule F, Part I</i>		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Part II</i>		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Part III</i>		X
17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? <i>If "Yes," complete Schedule G, Part I</i>		X
18 Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		X
19 Did the organization report more than \$15,000 on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20 Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>		X
21 Did the organization report more than \$5,000 on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>		X
22 Did the organization report more than \$5,000 on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>		X
23 Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? <i>If "Yes," complete Schedule J</i>		X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to question 25</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a <b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	N/A	
b Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? <i>If "Yes," complete Schedule L, Part I</i>	N/A	
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i>		X

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**Part IV** Checklist of Required Schedules (continued)

	Yes	No
<b>28</b> During the tax year, did any person who is a current or former officer, director, trustee, or key employee:		
<b>a</b> Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV		X
<b>b</b> Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV		X
<b>c</b> Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV		X
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M		X
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		X
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		X
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		X
<b>33</b> Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I		X
<b>34</b> Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1		X
<b>35</b> Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2		X
<b>36</b> Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	N/A	
<b>37</b> Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI		X

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**Part V** Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
<b>1a</b>	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable.		
<b>1b</b>	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.		
<b>c</b>	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
<b>2a</b>	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.		
<b>b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)		
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	X	
<b>b</b>	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.	X	
<b>4a</b>	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
<b>b</b>	If "Yes," enter the name of the foreign country. See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
<b>5a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
<b>b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
<b>c</b>	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?		
<b>6a</b>	Did the organization solicit any contributions that were not tax deductible?		X
<b>b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
<b>7</b>	<b>Organizations that may receive deductible contributions under section 170(c).</b> N/A		
<b>a</b>	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?		
<b>b</b>	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
<b>c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		
<b>d</b>	If "Yes," indicate the number of Forms 8282 filed during the year.		
<b>e</b>	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		
<b>f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		
<b>g</b>	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		
<b>h</b>	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		
<b>8</b>	<b>Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year? N/A		
<b>9</b>	<b>Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.</b> N/A		
<b>a</b>	Did the organization make any taxable distributions under section 4966? N/A		
<b>b</b>	Did the organization make a distribution to a donor, donor advisor, or related person?		X
<b>10</b>	<b>Section 501(c)(7) organizations. Enter:</b>		
<b>a</b>	Initiation fees and capital contributions included on Part VIII, line 12.	10a	579,509.
<b>b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.	10b	244,706.
<b>11</b>	<b>Section 501(c)(12) organizations. Enter: N/A</b>		
<b>a</b>	Gross income from members or shareholders.	11a	
<b>b</b>	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
<b>12a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?	12a	
<b>b</b>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year. N/A	12b	

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**Part VI Governance, Management, and Disclosure** (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)**Section A. Governing Body and Management**

For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	Yes	No
<b>1a</b> Enter the number of voting members of the governing body	12	
<b>b</b> Enter the number of voting members that are independent	12	
<b>2</b> Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
<b>3</b> Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	X	
<b>4</b> Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?		X
<b>5</b> Did the organization become aware during the year of a material diversion of the organization's assets?	X	
<b>6</b> Does the organization have members or stockholders?	X	
<b>7a</b> Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	X	
<b>b</b> Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	X	
<b>8</b> Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
<b>a</b> The governing body?	X	
<b>b</b> Each committee with authority to act on behalf of the governing body?	X	
<b>9a</b> Does the organization have local chapters, branches, or affiliates?		X
<b>b</b> If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?		
<b>10</b> Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990	X	
<b>11</b> Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		X

**Section B. Policies**

	Yes	No
<b>12a</b> Does the organization have a written conflict of interest policy? If "No," go to line 13		X
<b>b</b> Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?		
<b>c</b> Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done		
<b>13</b> Does the organization have a written whistleblower policy?		X
<b>14</b> Does the organization have a written document retention and destruction policy?		X
<b>15</b> Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision:		
<b>a</b> The organization's CEO, Executive Director, or top management official?		X
<b>b</b> Other officers or key employees of the organization?		X
Describe the process in Schedule O. (see instructions)		
<b>16a</b> Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
<b>b</b> If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?		

**Section C. Disclosure**

**17** List the states with which a copy of this Form 990 is required to be filed ► NONE

**18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.  
☐ Own website    ☐ Another's website    ☒ Upon request

**19** Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.

**20** State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ►  
MARY ELLEN JOHNSON - 920-498-6500  
P.O. BOX 10736, GREEN BAY, WI 54307-0736

**Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors****Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees**

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.

• List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List the organization's **five current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

☒ Check this box if the organization did not compensate any officer, director, trustee, or key employee.

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
BILL PLUMMER PRESIDENT	1.00	X		X				0.	0.	0.
LARRY MILLER VICE PRESIDENT	1.00	X		X				0.	0.	0.
TOM ADAMANY SECRETARY	1.00	X		X				0.	0.	0.
LEROY MATUSZAK TREASURER	1.00	X		X				0.	0.	0.
BEV MURPHY DIRECTOR	1.00	X						0.	0.	0.
LEROY MATUSZAK DIRECTOR	1.00	X						0.	0.	0.
DAVE TOONEN DIRECTOR	1.00	X						0.	0.	0.
MICHAEL CALAWERTS DIRECTOR	1.00	X						0.	0.	0.
DR. GORDON HAUGAN DIRECTOR	1.00	X						0.	0.	0.
AYMEE BALISON DIRECTOR	1.00	X						0.	0.	0.
RANDY BIEBEL DIRECTOR	1.00	X						0.	0.	0.
KAY KAPP DIRECTOR	1.00	X						0.	0.	0.
ROGER LEBRECK DIRECTOR	1.00	X						0.	0.	0.

<b>Part VII</b>	<b>Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees</b> <i>(continued)</i>
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(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
<b>1b Total</b>								0.	0.	0.

2	Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization	1
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- 3 Did the organization list any **former officer, director or trustee, key employee, or highest compensated employee** on  
line 1a? *If "Yes," complete Schedule J for such individual* . . . . .
- 4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization  
and related organizations greater than \$150,000? *If "Yes," complete Schedule J for such individual* . . . . .
- 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to  
the organization? *If "Yes," complete Schedule J for such person* . . . . .

	Yes	No
3		X
4		X
5		X

## Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization.

(A) Name and business address	(B) Description of services	(C) Compensation
TROON GOLF, LLC, 15044 NORTH SCOTTSDALE ROAD, SUITE 300, SCOTTSDALE, AZ 85254	REIMBURSEMENT OF CONTRACT SERVICES PR	2,275,655.
TROON GOLF, LLC, 15044 NORTH SCOTTSDALE ROAD, SUITE 300, SCOTTSDALE, AZ 85254	MANAGEMENT SERVICES OF ALL FACILITIES	135,000.
JAMES P. SCHULTZ PO BOX 10736, GREEN BAY, WI 54307	GOLF OPERATIONS DIRECTOR	105,000.
2 Total number of independent contractors (including those in 1) who received more than \$100,000 in compensation from the organization ▶ 3		



**Part VIII Statement of Revenue**

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1 a	Federated campaigns	1a				
	b	Membership dues	1b				
	c	Fundraising events	1c				
	d	Related organizations	1d				
	e	Government grants (contributions)	1e				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f				
	g	Noncash contributions included in lines 1a-1f \$					
	h	<b>Total.</b> Add lines 1a-1f					
Program Service Revenue	2 a	<u>MEMBER DUES &amp; ASSESME</u>	Business Code 713910	2,781,613.	2,781,613.		
	b	<u>GOLF REVENUE</u>	713910	502,336.	283,445.	218,891.	
	c	<u>TENNIS REVENUE</u>	713910	75,796.	75,796.		
	d	<u>SWIMMING POOL REVENUE</u>	713910	11,706.	11,706.		
	e						
	f	All other program service revenue					
	g	<b>Total.</b> Add lines 2a-2f		3,371,451.			
	Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)				
4		Income from investment of tax-exempt bond proceeds					
5		Royalties					
6 a		Gross Rents	(i) Real (ii) Personal				
b		Less: rental expenses					
c		Rental income or (loss)					
d		Net rental income or (loss)					
7 a		Gross amount from sales of assets other than inventory	(i) Securities (ii) Other				
b		Less: cost or other basis and sales expenses		6,300.			
c		Gain or (loss)		3,316.			
d		Net gain or (loss)		2,984.			
8 a		Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	a				
b		Less: direct expenses	b				
c		Net income or (loss) from fundraising events					
9 a		Gross income from gaming activities. See Part IV, line 19	a				
b		Less: direct expenses	b				
c		Net income or (loss) from gaming activities					
10 a		Gross sales of inventory, less returns and allowances	a	1711652.			
b	Less: cost of goods sold	b	802,112.				
c	Net income or (loss) from sales of inventory		909,540.	883,725.	25,815.		
Miscellaneous Revenue			Business Code				
11 a							
b							
c							
d	All other revenue						
e	<b>Total.</b> Add lines 11a-11d						
12	<b>Total Revenue.</b> Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e			4,283,975.	4,036,285.	244,706.	2,984.

**Part IX Statement of Functional Expenses**

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages				
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes				
11 Fees for services (non-employees):				
a Management	135,000.			
b Legal	115.			
c Accounting	8,390.			
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other	2,516,095.			
12 Advertising and promotion	21,143.			
13 Office expenses	91,174.			
14 Information technology	18,453.			
15 Royalties				
16 Occupancy	663,639.			
17 Travel	15,021.			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	2,194.			
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	469,418.			
23 Insurance				
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a <b>GOLF COURSE SUPPLIES</b>	193,288.			
b <b>OTHER OPERATING SUPPLIE</b>	131,489.			
c <b>REPAIRS AND MAINTENANCE</b>	83,111.			
d <b>LAUNDRY &amp; UNIFORMS</b>	68,339.			
e <b>EQUIPMENT RENTAL &amp; LEAS</b>	22,675.			
f All other expenses	81,579.			
25 <b>Total functional expenses.</b> Add lines 1 through 24f	4,521,123.			
26 <b>Joint Costs.</b> Check here <input type="checkbox"/> if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

**Part X Balance Sheet**

		(A) Beginning of year		(B) End of year
<b>Assets</b>	1 Cash - non-interest-bearing	848.	1	2,784.
	2 Savings and temporary cash investments		2	
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	552,392.	4	382,260.
	5 Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use	121,471.	8	98,280.
	9 Prepaid expenses and deferred charges	1,384.	9	1,204.
	10a Land, buildings, and equipment: cost basis	10a 13,080,321.		
	b Less: accumulated depreciation. Complete Part VI of Schedule D	10b 5,589,610.	10c	7,490,711.
	11 Investments - publicly traded securities		11	
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	4,792.
	15 Other assets. See Part IV, line 11		15	
16 <b>Total assets.</b> Add lines 1 through 15 (must equal line 34)	8,151,037.	16	7,980,031.	
<b>Liabilities</b>	17 Accounts payable and accrued expenses	425,755.	17	879,289.
	18 Grants payable		18	
	19 Deferred revenue		19	40,000.
	20 Tax-exempt bond liabilities		20	
	21 Escrow account liability. Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties	3,677,569.	23	3,463,256.
	24 Unsecured notes and loans payable		24	
	25 Other liabilities. Complete Part X of Schedule D	96,910.	25	167,906.
	26 <b>Total liabilities.</b> Add lines 17 through 25	4,200,234.	26	4,550,451.
<b>Net Assets or Fund Balances</b>	Organizations that follow SFAS 117, check here <input type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets		27	
	28 Temporarily restricted net assets		28	
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds	1,552,900.	30	1,319,100.
	31 Paid-in or capital surplus, or land, building, or equipment fund	8,485,663.	31	8,485,663.
	32 Retained earnings, endowment, accumulated income, or other funds	-6,087,760.	32	-6,375,183.
	33 <b>Total net assets or fund balances</b>	3,950,803.	33	3,429,580.
	34 <b>Total liabilities and net assets/fund balances</b>	8,151,037.	34	7,980,031.

**Part XI Financial Statements and Reporting**

- 1 Accounting method used to prepare the Form 990: ☐ Cash ☒ Accrual ☐ Other
- 2a Were the organization's financial statements compiled or reviewed by an independent accountant?
- b Were the organization's financial statements audited by an independent accountant?
- c If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
- 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- b If "Yes," did the organization undergo the required audit or audits?

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

**Schedule D**  
(Form 990)

Department of the Treasury  
Internal Revenue Service

**Supplemental Financial Statements**

▶ Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

OMB No 1545-0047

**2008**

Open to Public  
Inspection

Name of the organization

ONEIDA GOLF & COUNTRY CLUB, INC.

Employer identification number

39-0518065

**Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.** Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

**Part II Conservation Easements.** Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or pleasure)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of certified historic structure
<input type="checkbox"/> Preservation of open space	

2 Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶

4 Number of states where property subject to conservation easement is located ▶

5 Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year ▶

7 Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year ▶ \$

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenues included in Form 990, Part VIII, line 1 ▶ \$

(ii) Assets included in Form 990, Part X ▶ \$

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items:

a Revenues included in Form 990, Part VIII, line 1 ▶ \$

b Assets included in Form 990, Part X ▶ \$

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets** (continued)

3 Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a ☐ Public exhibition  
 b ☐ Scholarly research  
 c ☐ Preservation for future generations  
 d ☐ Loan or exchange programs  
 e ☐ Other \_\_\_\_\_

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

**Part IV Trust, Escrow and Custodial Arrangements.** Complete if organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV and complete the following table:

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV.

**Part V Endowment Funds.** Complete if organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Investment earnings or losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the year end balance held as:

- a Board designated or quasi-endowment ☐ %  
 b Permanent endowment ☐ %  
 c Term endowment ☐ %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i) unrelated organizations  
 (ii) related organizations

	Yes	No
3a(i)		
3a(ii)		
3b		

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIV the intended uses of the organization's endowment funds.

**Part VI Investments - Land, Buildings, and Equipment.** See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book value
1a Land		631,657.		631,657.
b Buildings		6,824,632.	2,782,493.	4,042,139.
c Leasehold improvements				
d Equipment		1,643,820.	967,018.	676,802.
e Other		3,980,212.	1,840,099.	2,140,113.
Total. Add lines 1a-1e. (Column (d) should equal Form 990, Part X, column (B), line 10(c).)				7,490,711.

Schedule D (Form 990) 2008

**Part VII Investments - Other Securities.** See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
Financial derivatives and other financial products		
Closely-held equity interests		
Other		
Total. (Col (b) should equal Form 990, Part X, col (B) line 12.)		

**Part VIII Investments - Program Related.** See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
Total. (Col (b) should equal Form 990, Part X, col (B) line 13.)		

**Part IX Other Assets.** See Form 990, Part X, line 15.

(a) Description	(b) Book value
Total. (Column (b) should equal Form 990, Part X, col (B) line 15.)	

**Part X Other Liabilities.** See Form 990, Part X, line 25.

(a) Description of liability	(b) Amount
Federal income taxes	
<b>CASH OVERDRAFT</b>	<b>71,906.</b>
<b>PREFERRED STOCK PAYABLE</b>	<b>96,000.</b>
Total. (Column (b) should equal Form 990, Part X, col (B) line 25.)	
	<b>167,906.</b>

In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48.

**Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements**

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	4,283,975.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	4,521,123.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	-237,148.
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	-50,275.
8	Other (Describe in Part XIV)	8	-233,800.
9	Total adjustments (net). Add lines 4-8	9	-284,075.
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	-521,223.

**Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return**

1	Total revenue, gains, and other support per audited financial statements	1	5,078,540.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	794,565.
e	Add lines 2a through 2d	2e	794,565.
3	Subtract line 2e from line 1	3	4,283,975.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12.)	5	4,283,975.

**Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return**

1	Total expenses and losses per audited financial statements	1	5,315,688.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Losses reported on Form 990, Part IX, line 25	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	0.
3	Subtract line 2e from line 1	3	5,315,688.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	-794,565.
c	Add lines 4a and 4b	4c	-794,565.
5	Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18.)	5	4,521,123.

**Part XIV Supplemental Information**

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b.

**PART XI, LINE 8 - OTHER ADJUSTMENTS:**

**CAPITAL STOCK ISSUED: 200.**

**PREFERRED STOCK REDEEMED: -234000.**

**EXPLANATIONS FOR PART XII, LINE 2D AND PART XIII, LINE 4B:**

**ON THE ORGANIZATION'S FINANCIAL STATEMENTS, COST OF GOODS SOLD (\$802,112)**

**IS LISTED WITHIN EXPENSES. IN ADDITION, A MISC. EXPENSE (\$7,547) HAS BEEN**

**Part XIV** Supplemental Information (continued)

LISTED WITHIN THE REVENUE SECTION OF THE FINANCIAL STATEMENTS. THE NET  
AFFECT IS \$794,565 ON BOTH THE RECONCILIATION OF REVENUE AND EXPENSES.



**SCHEDULE O**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990**

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No 1545-0047

**2008**

Open to Public  
Inspection

Name of the organization

ONEIDA GOLF & COUNTRY CLUB, INC.

Employer identification number  
39-0518065

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

TO PROVIDE MEMBERS A SAFE, DISCREET AND SECURE FAMILY ENVIRONMENT WITH  
MANY SOCIAL GATHERINGS, CHILDREN'S PROGRAMS, GOLF, SWIMMING, TENNIS,  
AND THE OPPORTUNITY TO TAKE LESSONS FROM TENNIS AND GOLF PROFESSIONALS.

FORM 990, PART VI, SECTION A, LINE 3: THE ORGANIZATION UTILIZES TROON  
GOLF, LLC TO MANAGE AND OPERATE THE ORGANIZATION'S FACILITIES, INCLUDING  
THE 18-HOLE GOLF COURSE, TENNIS COURTS, SWIMMING POOL, DINING ROOM, BAR,  
SHACK AND CABANA. AS SHOWN IN PART VII, SECTION B, TROON GOLF IS  
COMPENSATED A BASE MANAGEMENT FEE OF \$135,000 ANNUALLY WITH POTENTIAL  
INCREASE FOR INFLATION. IN ADDITION, AN INCENTIVE MANAGEMENT FEE WOULD BE  
PAID IF CERTAIN GROSS OPERATING PROFIT TARGETS ARE MET. THE TARGET WAS NOT  
MET FOR 2008 AND THEREFORE NO INCENTIVE MANAGEMENT FEES WERE PAID.

IN ADDITION, THE ORGANIZATION REIMBURSES TROON GOLF FOR TROON GOLF'S  
EMPLOYEES, INCLUDING ALL RELATED EMPLOYEE BENEFITS AND PAYROLL TAXES. THE  
ORGANIZATION DOES NOT HAVE ANY OF ITS OWN EMPLOYEES, RATHER TROON GOLF  
EMPLOYS ALL WORKERS. REIMBURSEMENTS TO TROON GOLF HAVE BEEN SHOWN ON PART  
IX IN LINE 11G, "OTHER SERVICES". THE TOTAL AMOUNT OF REIMURSEMENT HAS ALSO  
BEEN PROVIDED IN PART VII, SECTION B.

FORM 990, PART VI, SECTION A, LINE 5: THE ORGANIZATION BECAME AWARE THAT  
ITS PRIOR CONTROLLER HAD DIVERTED ASSETS (CASH ESTIMATED TO BE OVER \$2.6  
MILLION) FOR PERSONAL USE BETWEEN HIS EMPLOYMENT YEARS OF 1990 AND 2007. HE  
HAD WRITTEN CHECKS FROM THE ORGANIZATION'S CHECKING ACCOUNT FOR HIS OWN  
BENEFIT AND USED THE U.S. MAIL TO FACILITATE AND CARRY OUT THE SCHEME. IN

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule O (Form 990) 2008

832211  
12-18-08

**SCHEDULE O**  
(Form 990)

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990**

► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No. 1545-0047

**2008**

Open to Public  
Inspection

Name of the organization

ONEIDA GOLF & COUNTRY CLUB, INC.

Employer identification number

39-0518065

2008, THE DEFENDANT PLEAD GUILTY AND AGREED TO PAY RESTITUTION IN THE AMOUNT OF \$2,610,443.99 TO THE ORGANIZATION.

FORM 990, PART VI, SECTION A, LINE 6: THE ORGANIZATION LIMITS MEMBERSHIP TO 475 MEMBER-SHAREHOLDERS OF WHICH NO MORE THAN 300 SHALL BE GOLF MEMBERS. MEMBER-SHAREHOLDERS HAVE THE PRIVILEGE OF UTILIZING THE FACILITIES OF THE ORGANIZATION. IN ADDITION, 1/3 OF THE BOARD OF DIRECTORS IS ELECTED BY THE MEMBER-SHAREHOLDERS EACH YEAR. THE MEMBER-SHAREHOLDERS DO NOT ELECT THE OFFICERS HOWEVER.

ANY CHANGES IN THE GOLF COURSE MASTER PLAN MUST BE APPROVED BY A MAJORITY OF THE MEMBER-SHAREHOLDERS. BY-LAWS MAY BE AMENDED OR REPEALED BY A 2/3 VOTE OF THE MEMBER-SHAREHOLDERS.

IN THE EVENT OF ANY LIQUIDATION, DISSOLUTION, OR WINDING UP OF THE ORGANIZATION, ASSETS ARE FIRST TO BE DISTRIBUTED TO PREFERRED STOCKHOLDERS WITH ANY EXCESS FUNDS OR ASSETS THEN DISTRIBUTED TO THE COMMON STOCKHOLDERS.

FORM 990, PART VI, SECTION A, LINE 7A: THE 12 BOARD OF DIRECTORS ARE DIVIDED INTO THREE CLASSES OF FOUR MEMBERS EACH WITH THE TERMS OF OFFICE FOR EACH CLASS EXPIRING ANNUALLY. EACH YEAR, FOUR REPLACEMENT DIRECTORS ARE ELECTED BY THE MEMBER-SHAREHOLDERS TO REPLACE THE DEPARTING DIRECTORS. UPON THE DEATH, RESIGNATION, OR OTHER REMOVAL OF AN DIRECTOR DURING TERM, THE BOARD OF DIRECTORS ELECTS THE SUCCESSOR.

**SCHEDULE O**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990**

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No 1545-0047

**2008**

Open to Public  
Inspection

Name of the organization

ONEIDA GOLF & COUNTRY CLUB, INC.

Employer identification number

39-0518065

FORM 990, PART VI, SECTION A, LINE 7B: ANY CHANGES IN THE GOLF COURSE

MASTER PLAN MUST BE APPROVED BY A MAJORITY OF THE MEMBER-SHAREHOLDERS.

BY-LAWS MAY BE AMENDED OR REPEALED BY A 2/3 VOTE OF THE

MEMBER-SHAREHOLDERS.

IN THE EVENT OF ANY LIQUIDATION, DISSOLUTION, OR WINDING UP OF THE

ORGANIZATION, ASSETS ARE FIRST TO BE DISTRIBUTED TO PREFERRED STOCKHOLDERS

WITH ANY EXCESS FUNDS OR ASSETS THEN DISTRIBUTED TO THE COMMON

STOCKHOLDERS.

FORM 990, PART VI, SECTION A, LINE 10: THE FINANCE COMMITTEE IS PRESENTED

THE FORM 990 AND THE FINANCE COMMITTEE THEN APPROVES THE FORM 990. UPON

APPROVAL THE FORM 990 IS SUBSEQUENTLY FILED.

FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION'S FINANCIAL

STATEMENTS ARE AVAILABLE TO THE PUBLIC UPON WRITTEN REQUEST.